

APPLICATION INFORMATION

Application Type:: Regular (Utility)
Title:: LENS ATTACHMENT COMBINED WITH FORMATION
OF GOGGLES FRAME
Attorney Docket Number:: 9-11054-14US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 4B
Total Drawing Sheets:: 8
Small Entity:: Yes

INVENTOR INFORMATION

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Brent
Family name:: SHELDON
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street:: 72 Sherbrooke Street West, Apt. 3
City:: Montreal
State or Province:: Quebec
Country:: Canada
Postal or Zip Code:: H2X 1X3

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 020988
Phone number:: (514) 845-7126
Fax:: (514) 288-8389
E-Mail Address:: swapat@ogilvyrenault.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 020988